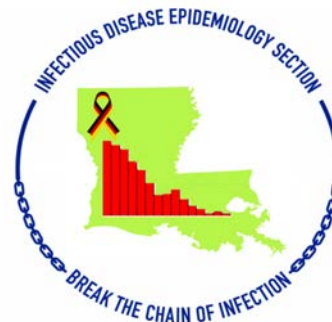


**Office of Public Health
Infectious Disease Epidemiology Section**

**Influenza -Like Illness (ILI) Surveillance
Weekly Report Form
2014-2015 Season**



Report for 7-day period ending	
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(Period ends Saturday at Midnight)

Facility Name	
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Total Patients Seen	
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Number of ILI Patients by age group				
<i>ILI is defined as fever $\geq 100^{\circ}\text{F}$ PLUS a cough or sore throat in the absence of another known cause.</i>				
0-4 years	5-24 years	25-49 years	50-64 years	>64 years

Number of flu tests performed		
Number of positive flu results	Type A	
	Type B	
	Positive, no type given	

**Please fax form by 3 p.m. on Mondays to
504-568-8290.**

(No cover sheet required)

Thank you!